

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS           | ID NO. | DATE     |
|---------------------------|--------------------|--------|----------|
| FEE DETERMINATION         | <i>[Signature]</i> |        | 10/14/02 |
| O.I.P.E. CLASSIFIER       |                    |        | 10-18-00 |
| FORMALITY REVIEW          | FH                 | TC 556 | 11-03-00 |
| RESPONSE FORMALITY REVIEW | request            | 925    | 04-12-01 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date    |
|----------|---------|
| Final    |         |
| Original |         |
| 1        | 1/20    |
| 2        | 1/18    |
| 3        | 1/18    |
| 4        | 1/27/05 |
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| Claim    | Date    |
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| Final    |         |
| Original |         |
| 51       | 5/27/05 |
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| Claim    | Date |
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NOT AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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